										Application or Docket Number /					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000									09724296						
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE			OTHER THAN			1
TOTAL CLAIMS			_				RATE			FEE	7		RATE FEE		
FOR			NUMBER FILED NUM			BER EXTRA		BASIC F	ᆿ	355.00	l <sub>on</sub>		•	10.00	1
TOTAL CHARGEABLE CLAIMS			LD minus 20m °			S   x		X\$ 9-	1		OR	X\$18=	t		1
INDEPENDENT CLAIMS			4 minus 3 =				X40-		1	40	08	-	H		ł
MULTIPLE DEPENDENT CLAIM P			RESENT					+135=		40	1	+270=	┞╴		ł
• 1	f the difference	in column 1 is	less than z	ero, ente	r "O" in	column 2	•	TOTAL	_1	395	OR		┡	<del>.                                      </del>	ł
CLAIMS AS AMENDED - PART II									١.	<u> </u>	, , ,	OTHER	TH	AM	1
_	(Column 1) (Column 2) (Column 3)							SMAL	LE	NTITY	OR	SMALL			l
AMENDMENT A		REMAINING AFTER		HACEH MUM PREVIO	BEA	PRESENT		RATE	Ţ,	ADDI- TIONAL		RATE		DDI:.	
		AMENDMENT		PAID	FOR	EXTRA			1	FEE				EE	: :
	Total	. 5	Minus	- 2	4	- 8		X\$ 9=			OR	X\$18=			į
	Independent	2	Minus		4			X40=	ı		OR	X80=	:"		į
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								1		OR	+270=	•		ı
. A								+135=				TOTAL	-		
4	5-05	- (Cohmo 1)	(Cohu	nn 2)	(Column 3)	,	ADDIT, FE	ΕĻ		OR	ADOIT. FEE	Ц_		ı	
AMENDACENT B		CLAIMS HIGHEST					1		T	ADDI-	1	1	A	DDI-	ı
		AFTER AMENDMENT		PREVIO	XISLY	PRESENT EXTRA	П	RATE	1	TIONAL		RATE	TIONAL		ı
	Total	. 2	Minus		<del>724.</del> 0	- 1	lł	Y 0 0 -	t	FEE		¥840	-	EE	
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١Y	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								╀		OR	X80=	_	1	l
							1	+135=	L		OR	+270=			l
							,	TOTAL COOT, FEE			OR	TOTAL ADOIT, FEE		$\mathbf{L}$	l
		(Column 1)		(Colum		(Column 3)									ı
NOMENT C		CLAIMS REMAINING		HGH W.H.S	ER.	PRESENT	ſ	_		ADDi-	•			DOI-	ĺ
		AFTER AMENDMENT		PREVIO PAID I		EXTRA	П	RATE		TIONAL FEE		RATE		NAL EE	
₫	Total	, <u>, , , , , , , , , , , , , , , , , , </u>	Minus	••		•		X\$ 9=	I		OR	X\$18=			ĺ
ME	Independent	•	Minue	***		•	lt	X40=	t		OR	X80=			ĺ
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										-	~.		_	$\dashv$	ŀ
135= +135= +135= YDYAL											OR	+270=			
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADOLT, FEE											OR ,	TOYAL NDOIT, FEE			l
	The Trighest Num	ber Previously Pai	d For' (Total o	Independe	erd) is the	highest number	r Stowa	nd in the ex	ppro	prists box	in coi	umn 1.			